STATE OF SOUTH DAKOTA

Statement of Legal Newspaper Ownership and Circulation

as required by SDCL § 17-2-2.5

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Return to: Secretary of State, 500 E. Capitol, Pierre, SD 57501-5077

1. TITLE OF NEWSPAPER: The Dakotan		2. DATE
3. FREQUENCY OF ISSUE: Weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY: 52	3B. ANNUAL SUBSCRIPTION PRICE $ 25 - 30

4. COMPLETE PHYSICAL ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers): 110 Main Ave. E., Bryant, SD 57221 (Hamlin County)

5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers): 110 Main Ave., E, Bryant, SD 57221

6. FULL NAME OF PUBLISHER: Stephanie Bawdon

7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.

FULL NAME	COMPLETE MAILING ADDRESS
Stephanie Bawdon	110 Main Ave. E, Bryant SD 57221

8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.

NONE

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run)	400	400
B. PAID AND/OR REQUESTED CIRCULATION 1. Sales through dealers and carriers, street vendors, counter sales, and paid electronic copies.		
2. Mail Subscription (Paid and or requested)	345	352
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1 and 9B2)	345	352
D. FREE DISTRIBUTION 1. BY MAIL, CARRIER OR OTHER MEANS	14	14
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	25	25
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	384	391
F. COPIES NOT DISTRIBUTED 1. Office use, left over, unaccounted, spoiled after printing	16	9
2. Return from News Agents		
G. TOTAL (Sum of E, F1 and F2 – Should equal net press run shown in A)	400	400

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

Stephanie Bawdon
(Signature)

Owner
(Title)

State of South Dakota)
§
County of Hamlin)

Sworn to before me this 29th day of October, 2015

Notary Public

(Seal)

My commission expires: 11-5-17

Form: SOS REC 051 3/2015